

**CLAIMS ONLY**

1

Application Number  
101503807

**Filing Date**

**Applicant(s)**

\* May be used for additional claims or amendments

**CLAIMS ONLY**

Application Number

101573807

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
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27	1					
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36						
37						
38						
39	1					
40						
41						
42						
43						
44						
45						
46	1					
47						
48						
49						
50						
Total Indep	3					
Total Depend	20					
Total Claims	23					

\* May be used for additional claims or amendments

*		*	*	*	*
Indep	Depend	Indep	Depend	Indep	Depend
51					
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99					
100					
Total Indep					
Total Depend					
Total Claims					